



**2025 Compliance Requirements Attestation Form – Medicaid-Specific Provider Training for Florida**

**Important:** Complete the Medicaid compliance training if your organization has rendered or may render healthcare services for a Medicaid-eligible beneficiary who is a member of a Humana-administered Medicaid plan in Florida.

**As a duly authorized representative of the organization listed at the bottom of this form, I hereby acknowledge and agree that the organization:**

- Understands the Medicaid training sessions listed below and made available by Humana this calendar year at [Humana.com/HealthyFL](https://Humana.com/HealthyFL)
- May need to complete training for multiple states if the organization has an opportunity to render services in a state bordering one in which Humana administers a plan for Medicaid-eligible beneficiaries
- Trains its applicable employees and downstream entities this calendar year on the topics below

Please be sure to check the box next to each type of training.

**Provider Orientation and Training**

Accept – Content used is Humana’s Medicaid Orientation and Training or is materially similar.

**Health, Safety and Welfare Education Training**

Accept – Content used is Humana’s Health, Safety and Welfare Education Training or is materially similar.

**Cultural Competency Training**

Accept – Content used is Humana’s Cultural Competency Training or is materially similar.

**Reviewed and agreed:**

\_\_\_\_\_  
Printed name of compliance contact                      Signature of compliance contact                      Date

\_\_\_\_\_  
Organization name                      Phone number                      Fax number

\_\_\_\_\_  
Email address                      Organization street address, city, state, ZIP code

\_\_\_\_\_  
Tax Identification Number(s)

Email completed form to [NNO\\_ProviderCompliance@Humana.com](mailto:NNO_ProviderCompliance@Humana.com).

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan, Inc.